

COLORADO MOUNTAIN COLLEGE  
STUDENT WORKSTUDY TIME SHEET

STUDENT: \_\_\_\_\_ ACCOUNT #: \_\_\_\_\_  
FROM ELIGIBILITY SHEET  
 S ID #: \_\_\_\_\_ PAY PERIOD: \_\_\_\_\_

DATE	DAY	TIME STARTED	TIME ENDED		TIME STARTED	TIME ENDED	TOTAL
	SUNDAY						
	MONDAY						
	TUESDAY						
	WEDNESDAY						
	THURSDAY						
	FRIDAY						
	SATURDAY						

COMPLETE  
TIMESHEET  
IN **BLACK**  
INK ONLY

ROUND UP  
TIME TO  
NEAREST  
1/4 HOUR

				WEEKLY TOTAL:	HOURS		
DATE	DAY	TIME STARTED	TIME ENDED		TIME STARTED	TIME ENDED	TOTAL
	SUNDAY						
	MONDAY						
	TUESDAY						
	WEDNESDAY						
	THURSDAY						
	FRIDAY						
	SATURDAY						

HOURS ARE  
NOT TO  
EXCEED  
THE  
AMOUNT  
SPECIFIED  
ON  
STUDENT  
ELIGIBILITY  
SHEET

				WEEKLY TOTAL:	HOURS		
DATE	DAY	TIME STARTED	TIME ENDED		TIME STARTED	TIME ENDED	TOTAL
	SUNDAY						
	MONDAY						
	TUESDAY						
	WEDNESDAY						
	THURSDAY						
	FRIDAY						
	SATURDAY						

**PAY PERIOD TOTAL = \_\_\_\_\_ HOURS**

Employee and Supervisor MUST sign, missing or proxy signatures will cause time sheet to be rejected and payment delayed.  
 I certify that I have worked the above hours:

\_\_\_\_\_  
Employee Signature      \_\_\_\_\_  
Date      Employee Name - Printed      \_\_\_\_\_  
Phone Ext

I hereby certify the hours and days indicated represent time worked by the employee:

\_\_\_\_\_  
Supervisor Signature      \_\_\_\_\_  
Date      Supervisor Name - Printed      \_\_\_\_\_  
Date

\*\*\*SUPERVISORS ARE RESPONSIBLE TO SEND TIME SHEET TO CENTRAL SERVICES VIA EMAIL TO [finaid@coloradomtn.edu](mailto:finaid@coloradomtn.edu) ON  
 THE PAY PERIOD ENDING DATE\*\*\*

TIME SHEETS RECEIVED BY THE 1ST OF THE MONTH WILL BE PAID ON THE 15TH OF THE MONTH  
 TIME SHEETS RECEIVED THE 2ND TO THE 16TH OF THE MONTH WILL BE PAID ON THE LAST DAY OF THE MONTH